

**GOVERNOR'S OFFICE of CRIME CONTROL & PREVENTION**  
**FY 2016 School Bus Safety Enforcement Fund (SBSE) Grant**  
**Notice of Funding Available (NOFA)**  
**Application Guidance Kit**



**Online Submission Deadline: March 31, 2015, 3 pm**  
**Hardcopy Submission Deadline: April 7, 2015, 3 pm**

**Funded through:**

Governor's Office of Crime Control & Prevention  
300 East Joppa Road, Suite 1105  
Baltimore, MD 21286-3016  
(410) 821-2828  
(877) 687-9004  
[www.goccp.maryland.gov](http://www.goccp.maryland.gov)

Lawrence J. Hogan Jr., Governor  
Boyd K. Rutherford, Lt. Governor  
Christopher B. Shank, Executive Director

**ELIGIBILITY**

GOCCP is making funds available to local law enforcement agencies and Maryland State Police barracks for enforcement programs to target drivers who fail to stop for school bus vehicles in identified problem areas. A qualifying municipality is any incorporated city or town. Municipal governments must apply for the grant funds going to the municipal's police department for the School Bus Safety Enforcement effort.

**IMPORTANT NOTES**

Applicants are required to apply for grant funding through the GOCCP online application process located on the GOCCP website [www.goccp.maryland.gov/gms](http://www.goccp.maryland.gov/gms). Additionally, all applicants **MUST** provide proof that they have a valid federal **DUNS** number and be **currently registered** with [www.SAM.gov](http://www.SAM.gov). A screenshot from SAM.GOV reflecting this information is sufficient.

## Getting Started

Thank you for applying for the **School Bus Safety Enforcement program (SBSE)** from the Governor's Office of Crime Control & Prevention (GOCCP). The School Bus Safety Enforcement program provides up to \$35,000 per county, including Baltimore City, to address the problems of drivers illegally passing school bus vehicles while loading and unloading students. GOCCP encourages applicants to request funding for proactive safety measures such as public service announcements through theaters, billboards, radio, and public television. Funds can also be used to increase law enforcement presence on school campuses.

If you need application assistance, please contact:

Sharron Melvin, SBSE Program Manager  
410-821-2833  
SMelvin@goccp.state.md.us

Justice Schisler, Division Chief  
410-821-2844  
JSchisler@goccp.state.md.us

GOCCP success is measured by sub-recipient success. It is critical that we hear from you, our customers. To share your ideas of how GOCCP can serve you better, email us at [info@goccp-state-md.org](mailto:info@goccp-state-md.org).

### **Governor's Office of Crime Control & Prevention Mission:**

GOCCP is Maryland's one stop shop for resources to improve public safety. GOCCP exists to educate, connect, and empower Maryland's citizens and public safety entities through innovative funding, strategic planning, crime data analysis, best practices research, and results-oriented customer service.

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## **I. TRAINING / TECHNICAL ASSISTANCE (TA)**

To help applicants prepare and submit applications that reflect GOCCP's established guidelines and procedures, training is provided through training videos posted on the GOCCP website. These may be accessed through the following web URL: <http://www.goccp.maryland.gov/gms-training/>. Please review the training videos prior to working on your application (system guidelines, fiscal review and tips, civil rights requirements, and those specific to the program funding source).

## **II. INTRODUCTION/SCOPE**

Each year the School Bus Safety Enforcement (SBSE) Fund provides \$550,000, in state grant funds, to be awarded to law enforcement agencies to address the problem of drivers illegally passing school bus vehicles while loading and unloading students. These funds are contingent upon inclusion in the State budget by the Maryland General Assembly.

GOCCP will award grants to selected law enforcement agencies that submit creative plans and objectives for targeting drivers who fail to stop for school bus vehicles in identified problem areas. State law allows GOCCP to award up to \$35,000 per county and Baltimore City at the start of each fiscal year, July 1. However, if funds remain available after the initial grants are awarded in a fiscal year, GOCCP may make supplemental grant awards. To enhance the use of these available funds, inter-agency cooperation and community partnerships within counties are encouraged. GOCCP encourages applicants to request funding for proactive safety measures as well as public service announcements.

The National Association of State Directors of Pupil Transportation Services released the results of its fourth annual National Stop-Arm Violation Survey conducted in 29 states throughout the country. Twenty percent of the nation's school bus drivers participated in the one-day survey to report how many times motorists passed their stopped school buses illegally. Over 97,000 school bus drivers reported that 75,966 vehicles passed their buses illegally on a single day.

The following resource guides may be used to assist you with the development of your program:

District of Columbia Metropolitan Police  
<http://mpdc.dc.gov/page/school-bus-safety-tips>

North Carolina School Bus Safety Web Site  
<http://www.ncbussafety.org/>

Illinois Department of Transportation  
[http://www.isbe.state.il.us/funding/pdf/bus\\_safety\\_motorist.pdf](http://www.isbe.state.il.us/funding/pdf/bus_safety_motorist.pdf)

All funding is contingent upon GOCCP receiving the specified grant funds from the State of Maryland. As of the posting of this NOFA, the State of Maryland General Assembly has not provided final budget appropriations.

## **III. ELIGIBILITY CRITERIA**

The following entities in Maryland are eligible to submit no more than **one (1)** application for SBSE Funding:

- Local law enforcement agencies
- Maryland State Police

#### IV. APPLICATION PROCESS

Applicants are required to apply for grant funding through the GOCCP web-based application process, which may be accessed through the GOCCP website homepage: [www.goccp.maryland.gov](http://www.goccp.maryland.gov) by clicking on **GRANTS MANAGEMENT SYSTEM (GMS)**, or go directly to the login screen using the web URL [www.goccp.maryland.gov/gms](http://www.goccp.maryland.gov/gms).

**In order to use the GOCCP web-based application you must have a User ID.**

If you have *not* previously applied through the web go to the following web URL to obtain instructions and the information required to obtain a User ID and password:

<http://www.goccp.maryland.gov/grants/access-to-gms.php>

The last day to request a USER ID is March 20, 2015. If you have previously applied through the web, use your same User ID.

If you have previously applied to GOCCP but *do not have your User ID*, or are having *technical issues with the system*, contact the GOCCP Helpdesk via email at [Support@goccp.freshdesk.com](mailto:Support@goccp.freshdesk.com) for assistance.

If you need assistance completing the program specific information required in the online application please contact Sharron Melvin, at 410-821-2833 or [SMelvin@goccp.state.md.us](mailto:SMelvin@goccp.state.md.us) or Justice Schisler, Division Chief, at 410-821-2844 or [JSchisler@goccp.state.md.us](mailto:JSchisler@goccp.state.md.us).

**In addition to the online submission, you must submit one (1) hard copy original** (generated by the online system and bearing original signatures in blue ink for the certifications and anti-lobbying documents) **and three (3) additional copies of the application.**

**The online application must be submitted no later than 3:00 PM on March 31, 2015. All of the aforementioned documents must be submitted to GOCCP no later than 3:00 PM on April 7, 2015.**

***Email/Fax submissions will not be accepted. Please do not use binders or folders; all hard copies must be generated by the online system.***

#### V. IMPORTANT DATES

- |   |                         |
|---|-------------------------|
| ➤ SBSE Technical Assistance Webinar posted        | January 1, 2015         |
| ➤ Deadline to Request a User ID                   | March 20, 2015          |
| ➤ Deadline to Submit an Online Application        | March 31, 2015, 3:00 pm |
| ➤ Hardcopy (plus 3 copies) Application Due        | April 7, 2015 3:00 pm   |
| <i>Fax/Email hardcopies will not be accepted.</i> |                         |
| ➤ Award Documents/Denial Letters Mailed           | July 17, 2015           |
| ➤ Sub-award Start Date                            | August 1, 2015          |
| ➤ Sub-award End Date                              | June 30, 2016           |

#### VI. FUNDING SPECIFICATIONS

##### A. Funding Cycle

Commencement of awards funded under the SBSE Program for FY 2016 will begin August 1, 2015, and end on June 30, 2016. Funds are paid on a reimbursable basis.

## **B. Budget**

Budgets must be clear and specific. Budgets must reflect one year of spending and, where applicable, be adjusted to reflect start date, state furlough days, and holidays. GOCCP reserves the right to reduce budgets.

The prioritization of line items is required for all applications having multiple line items. Applicant requirements will be taken into consideration should budgets need to be reduced.

The justification sections must contain brief statements (1 to 2 sentences per line item) that explain each line item and their relevance to the project goals and objectives. **Do not state "See Narrative, Goals, or Objectives".**

## **C. Allowable Costs for Direct Services**

The following is a listing of services, activities, and costs that are eligible for support with SBSE grant funds within a sub-recipient's organization:

- Overtime
- Public Service Announcements
  - Television Announcements
  - Billboards
  - Cinema Ads

## **VII. EVALUATION CRITERIA**

GOCCP will assess the worth of each organization's overall project based on the following:

- Problem Statement/Needs Justification
- Project Description
- Description of Goals, Objectives, and Reaching Objectives
- Performance Measures
- Organization Management Capabilities/Cooperating Agencies
- Project Evaluation & Sustainability
- Budget

GOCCP will also assess each jurisdiction's need for funding based on the following criteria:

- Documentation of need
- Geographic size and location
- Grantees' historical spending patterns throughout the school year

SBSE is a competitive application process. Appropriate procedures which include the appointment of a panel or committee will be established to review these applications. GOCCP will also conduct an internal review of each application submitted in accordance with this NOFA.

## **VIII. DISTRIBUTION OF FUNDS & REPORTING REQUIREMENTS**

GOCCP will distribute awarded funds to recipients on a quarterly reimbursement of expenditures basis in conjunction with the timely submission of corresponding quarterly Fiscal and Programmatic Reports. These reports must be submitted through the online GOCCP Grants Management System (GMS) and a mailed hardcopy. All programmatic electronic reports are due within 15 days of the end of each quarter; financial report hardcopies are due within 30 days of the end of each quarter. All reporting activity occurs through the GOCCP GMS, using the same User ID and password that was used for the application process.

For further Post Award Instructions read your Special Conditions, and go to:

<http://www.goccp.maryland.gov/grants/general-conditions.php>

**Electronic Funds Transfer (EFT)** – GOCCP encourages the use of electronic funds transfer (EFT). To obtain the appropriate form, the address to submit the form, and a general overview, including FAQs, refer to the following website:

[http://compnet.comp.state.md.us/General Accounting Division/Vendors/Electronic Funds Transfer/](http://compnet.comp.state.md.us/General_Accounting_Division/Vendors/Electronic_Funds_Transfer/)

## **IX. MATCH**

There is no match required for this funding source. Do NOT enter match into your budget. If you wish to show other financial or in-kind contribution to your program, it may be written into your narrative.

## **X. APPLICATION WEBSITE WORKSHEET**

### **Notice to All Applicants:**

The information collected on the grant application form is collected for the purposes of the Governor's Office of Crime Control & Prevention's (GOCCP) function under Executive Order 01.01.2005.36. Failure to provide all of this information may result in the denial of your application for funding. GOCCP is a government entity; upon submission, this application is considered public information. GOCCP does not sell collected grant information. Under the Maryland Public Information Act (PIA) (MD State Government Code Ann. 10-617 (h)(5)), you may request in writing to review grant award documentation. Please send those requests to GOCCP, 300 E. Joppa Rd., Suite 1105, Baltimore, MD 21286-3016

### **A. FACE SHEET TAB INSTRUCTIONS**

#### **1. PROJECT TITLE:**

The project title should be brief, precise, and reflect what is being funded. For example: "Overtime Patrols/Public Awareness", "School Bus Safe Ride", or "Overtime Patrols."

#### **2. APPLICANT AGENCY**

The unit of local government (county, city, town, or township) or State agency that is eligible to apply for grant funds (See Eligible Applicants). Full details about the Applicant Agency (Federal ID, DUNS, etc) may be viewed by clicking the corresponding underlined organization field. If any information needs to be revised, contact [support@goccp.freshdesk.com](mailto:support@goccp.freshdesk.com).

If the Government, Township, or Board of Commissioners mandates that the County Executive, Mayor, or Commissioner sign all grant award documents (for all subordinate agencies) then the Government, Township, or Board of Commissioners MUST be the APPLICANT Agency.

**DUNS/SAM Registration:** Provide your DUNS number and SAM.GOV *expiration date at the end of your Narrative*. In an appendix, attach proof of your agency's current SAM registration from [www.sam.gov](http://www.sam.gov). Include a printed screenshot of **just the page that lists your DUNS number and SAM.GOV expiration date**. Please do not include any additional pages (i.e., those containing banking information). **Access to SAM.GOV and DUNS (D&B):**

<https://www.sam.gov/portal/public/SAM/>

<http://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=81407B1F03F2BDB123DD47D19158B75F>

### 3. AUTHORIZED OFFICIAL

You may view the contact information for either agency's Authorized Official by clicking their underlined name. A popup box will appear after clicking their name. Procedures for revising an agency's authorized official can be obtained by contacting [support@goccp.freshdesk.com](mailto:support@goccp.freshdesk.com) or by viewing Condition # 18 at: <http://www.goccp.maryland.gov/grants/general-conditions.php>.

### 4. IMPLEMENTING AGENCY

The name of the entity that is responsible for the operation of the project. Full details about the Implementing Agency (Federal ID, DUNS, etc) may be viewed by clicking the corresponding underlined organization field. Contact [support@goccp.freshdesk.com](mailto:support@goccp.freshdesk.com) to make any revisions.

### 5. 'Is service site?' CHECKBOX

Clicking these checkboxes automatically adds the Applicant and/or Implementing Organization to the Service Site tab.

### 6. PROPOSED START/END DATES

**Start and end date are determined by the parameters of the NOFA** (August 1, 2015 – June 30, 2016) and are filled in automatically. Projects may not exceed eleven (11) months or commence before the NOFA defined start date.

### 7. PREPARER INFORMATION

Enter the name of the person completing the application, their phone number and their email address.

### 8. OFFICERS TAB INSTRUCTIONS

To add a new officer or new contact to the GMS, contact [support@goccp.freshdesk.com](mailto:support@goccp.freshdesk.com).

### 9. PROJECT DIRECTOR

Select the person who will be responsible for oversight and administration of the project on behalf of the applicant. Selections are limited to implementing/applicant agency personnel in the GMS.

### 10. FISCAL OFFICER

Select the person who will be responsible for financial reporting and record keeping for the project. You may select any contact currently in the GMS. Use the search windows to search by last name, organization, and/or job title.

### 11. CIVIL RIGHTS CONTACT

Select the agency's point of contact for handling internal civil rights violation complaints (usually a Human Resources or Personnel Manager). You may select any contact currently in the GMS. Use the search windows to search by last name, organization, and/or job title.

### 12. SERVICE SITES TAB INSTRUCTIONS

If the service site is either the applicant agency and/or the implementing agency, select the associated "Is service site?" check box(es) on the application Face Sheet.

Otherwise, provide the site name and full address, **for the location(s) the project is taking place/serving**. If there is more than one location, please enter complete information for each site (up to five). If the project has a statewide or countywide impact, please enter "state-wide," or "county-wide" in the 'Site Name' field and the county served in the 'City' field. Whether an address is provided, or "state-wide" is entered, or "county-wide" is entered, the 'CITY' field and nine (9) digit zip-code **must** be provided.

Example:

Site Name: **Anytown Police Department**



Address: **123 Main Street**  
**Some City, MD 21000-0570**

OR if Location is 'County-wide' or 'State-wide': **must still list a City and 9-digit zip for funding source reporting.**

## **B. SUMMARY TAB INSTRUCTIONS**

The Project Summary should provide a concise summary of your proposal and be limited to 100 words or less. Because the SBSE program is funding a very specific service, GOCCP would like to make writing the project summary as simple and consistent as possible. Use the template provided below for your project summary.

The \_\_\_\_ Implementing Agency's<sup>1</sup> \_\_\_\_ Project Title<sup>2</sup> \_\_\_\_ program targets drivers who fail to stop for school buses that are loading or unloading passengers. The program supports proactive safety measures by \_\_\_\_\_.<sup>3</sup> A Public Service Announcement campaign \_\_\_\_\_.<sup>3</sup> Program funds provide salary, overtime, and public service announcements.<sup>4</sup>

**Make the following additions/changes to the above template:**

1. The beginning of the first sentence contains the Agency's Name and the Program Project Title.
2. 1-2 sentences describing the program's main function and who the program benefits/serves.
3. The last sentence summarizes the budget items proposed to be funded.

## **C. NARRATIVE TAB INSTRUCTIONS**

Provide a description of the program timeline, and potential for information sharing. The contents for the narrative are explained below. The Narrative must be in an outline-styled format (**retaining all numbering, lettering, and headers**). Incomplete narratives may be returned for revision.

1. **Problem Statement:** Include a description of the nature and extent of the problem to be addressed, target population, and geographical area served. Provide the latest statistical data to document the problem. What efforts have been made to address this problem in the past, if any? What will be accomplished by this project?
2. **Goals, Objectives and Performance Measures:** Each application must include clearly defined goals, objectives, and performance measures.
  - **GOALS:** Provide a broad statement that conveys, in general terms, the program's intent to change, reduce, or eliminate the problem described. Goals identify the program's intended short and long-term results for the anticipated funding year.
  - **OBJECTIVES:** Explain how the program will accomplish the goals. Objectives are specific, quantifiable statements of the program's desired results, and should include the target level of achievement, thereby further defining goals and providing the means to measure program performance.
  - **PERFORMANCE MEASURES:** Quantitative ways to objectively measure the degree of success a program will have in achieving its stated objectives, goals, and planned program activities. *GOCCP reserves the right to add or delete performance measures to applications selected for funding.*

OUTCOMES/OBJECTIVES	PERFORMANCE MEASURES	HOW MEASURED/ OUTPUTS
To reduce/prevent number of vehicles illegally passing a school bus that is stopped and operating alternately flashing red lights.	Number of citations issued for illegally passing a school bus that is stopped and operating alternately flashing red lights during the reporting period.	Number of citations issued.
Same as above	Number of complaints received for vehicles illegally passing a school bus during the reporting period.	Number of complaints received.
Same as above	Number of Public Service Awareness campaigns to educate drivers about SBSE laws.	Number of movie screens. Number of tv/radio announcements. Number of handouts.

- 3. Strategy and Timeline:** This section details any planning process that was undertaken in developing the plan of response. Further, it should provide an overview of the strategy to be employed and the timeline for implementing the strategy. Include linkages to other programs, organizations, and stakeholders that will be involved in or impacted by the grant program.
- 4. Spending Plan:** Detail the timeline for the implementation of each budget line item (i.e., personnel costs will be expended evenly in each quarter; personnel costs cannot be projected evenly in each quarter due to overtime variance).
- 5. Management Capabilities:** Qualifications and Experience of Implementing Agencies: Provide a brief description of the agency's experience and achievements that qualify the agency to conduct the project.  
  
Present and Proposed Staff: List the names and provide a short professional biography of the project director and financial officer. Clearly identify, by name and title, requested personnel.
- 6. Sustainability:** What prospects exist for continued financing of the project when grant funds are terminated? What efforts have been or will be made to continue the methods, techniques, and operational aspects of the project when the grant funds are concluded? Indicate planned future sources of funding or proposed jurisdictional planning efforts (if possible, include one copy of your Annual Report with your original application).
- 7. Mandatory Information Sharing:** Include linkages to other programs, organizations, and stakeholders that will be involved in or impacted by the grant program. Previous sub-recipients are required to meet with the Maryland Association of Pupil Transportation Board for their county to discuss the problem of drivers illegally passing school vehicles and their proposed enforcement strategy. A letter outlining this meeting must be received by March 31, 2015 noting your existing grant number. **Applications will be automatically disqualified if this information is not received. If multiple law enforcement agencies are involved with SBSE services in your jurisdiction note who the primary law enforcement agency is and outline coordination between agencies.**
- 8. Demonstrated Need for Funding:** Mandatory: applications will be automatically disqualified if this information is not submitted. This section outlines the required information for a complete narrative. Applicants are asked to use headings in their outline to identify each section.
  1. Number of current sworn personnel
  2. Number of current non-sworn personnel
  3. Number of schools in your service area
  4. School population serviced by your agency

5. Number of school buses in your service area
6. Miles/areas covered

**9. Previous SBSE Effectiveness:** If you have received any SBSE funding in the past, please provide statistics on the three most recent year(s) to include:

1. Number of citations per school year
2. Number of warnings per school year
3. Number of arrests per school year

If no statistics are provided, funding may be reduced.

#### **10. LETTERS OF SUPPORT/COMMITMENT (mandatory)**

In an appendix to your application, submit letters of commitment by partners who participate in the execution of the project or whose cooperation or support is necessary to its success. Letters of support are mandatory. **Letters of commitment/support will only be accepted when they accompany the submitted hardcopies of the application.**

### **D. BUDGET TAB INSTRUCTIONS**

#### ***BUDGET – GENERAL REQUIREMENTS***

You must complete a detailed budget for your proposed project. All 'Total Budget' fields will be rounded by the GMS to the nearest whole dollar. There is no match requirement for this program.

Budgets must be clear and specific. Budgets must reflect eleven (11) months of spending and where applicable, be adjusted to reflect start date, state furlough days, and holidays. The grant cycle will reflect eleven (11) months, August 1, 2015 to June 30, 2016.

Each budget line item must include a justification entry. The justification sections must contain brief statements (1 to 2 sentences per line item) that explain each line item and their relevance to the project goals and objectives. **Do not state "See Narrative, Goals, or Objectives".**

GOCCP is requiring prioritization of budget requests. This requirement is addressed following the Budget Tab Instructions under 'Budget Priority Tab.'

Refer to the GMS training videos for further instructions <http://www.goccp.maryland.gov/gms-training>.

#### **MATCH:**

Match is not required for this program, therefore DO NOT enter match into your budget. If you wish to reflect that there are matching contributions, refer to it in your Narrative.

#### **PERSONNEL**

The salaries and fringe benefits for staff required to implement the project are listed in the personnel category. Consultants must be listed in Contractual Services. **Time and Effort reports (Timesheets) must be maintained for all personnel included in the grant project. Refer to the bottom of the page at <http://www.goccp.maryland.gov/grants/grantee-toolbox.php> for more information.** If you are paying an employee directly, he/she should be entered in the Personnel category. For each position, list salary and fringe benefits on separate line items.

+ Add Budget Revision		Original Grant Application Budget		Original Budget		Previous Budget		Print	Refresh
Help	Budget Category		Total Grant Funds		Total Cash Match		Total In Kind		Total Budget
?	Personnel		\$33,000.00		\$0.00		\$0.00		\$33,000.00
	Description of Position	Salary Type	Funding	Wage Type	Wage Amount	Total Budget	Just.		
▼	Community Outreach Coordinator								\$22,000.00
	Community Outreach Coordinator	Salary	Grant Funds	Annual	\$60,000.00	\$20,000.00	<a href="#">[View/Edit]</a>		
	Community Outreach Coordinator	Fringe	Grant Funds	Annual	\$20,000.00	\$2,000.00	<a href="#">[View/Edit]</a>		
▼	Community Outreach Trainer								\$11,000.00
	Community Outreach Trainer	Salary	Grant Funds	Annual	\$40,000.00	\$10,000.00	<a href="#">[View/Edit]</a>		
	Community Outreach Trainer	Fringe	Grant Funds	Annual	\$10,000.00	\$1,000.00	<a href="#">[View/Edit]</a>		

- The 'Description of Position' field must contain the title of the position.
- Position line items (salary and fringe) are grouped via the 'Description of Position' field.
- After completing the first Position's line item, use the dropdown to add additional budget items to the position.
- The 'Description of Position' field is used to select existing positions and to add new positions.
- For multiple staff in the same position, use a suffix (i.e., Position 1, Position 2, etc.)
- Multiple positions with the same hourly rate may be grouped (i.e., Overtime Patrols – 25 Officers).

Note: Fringe benefits cannot exceed 30% of reported salary costs. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

Example justifications based on the Personnel category:

Justification (line 1):

The Community Outreach Coordinator helps prepare, schedule, and develop trainings targeted for hospitals and other medical facilities.

Annual salary is \$60,000. She will be devoting 33% of her time to this project. We are requesting  $\$60,000 \times .33 = \$20,000$  in grant funds to support her time on this project.

Justification (line 2):

Fringe benefits @ 10% of salary.  $\$20,000 \times .10 = \$2,000$

Justification (line 3):

The Community Outreach Trainer makes presentations at hospitals and other medical facilities.

Annual salary is \$40,000. She will be devoting 25% of her time to this project. We are requesting  $\$40,000 \times .25 = \$10,000$  in grant funds to support her time on this project.

Justification (line 4):

Fringe benefits @ 10% of salary.  $\$10,000 \times .10 = \$1,000$

## **CONTRACTUAL SERVICES\***

Consultant contracts for training or evaluation should be included here and shall be consistent with federal guidelines. Construction projects are ineligible for funding under grant programs and expenses for construction may not be included. If you are paying an outside agency for an employee, they are Contractual. For the line item description, enter the agency (Consulting firm, temporary agency, etc.), a dash and then the nature of the service to be provided (e.g., Consultants ABC – training for Seminar). For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

\*A copy of all contracts associated with items listed in the Contractual Services category must be included with your application.

## **EQUIPMENT**

Equipment is defined as having a useful life in excess of one year and a procurement cost of \$100 or more per unit or \$50 or more per unit for computer and sensitive items. Costs may include taxes, delivery, installation and similarly related charges. The procurement process used must be consistent with your written procurement guidelines. If such guidelines do not exist, refer to the State of Maryland guidelines by accessing General Condition # 17 on the GOCCP Website under the Grantees Area.

Maintaining internal inventory records for equipment procured under this funding source is mandatory. For post award inventory requirements, access General Condition #18 on the GOCCP Website. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

Property Inventory Report Forms (PIRFs) will only be required for equipment that costs \$5,000 or more per unit cost.

## **OTHER**

Include all other anticipated expenditures which are not included in the previous categories. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

## **E. BUDGET PRIORITIZATION TAB**

After completing the Budget tab, click on the Budget Priority tab in the GMS. This tab will provide a list of all budget line items that the applicant has entered in the previous Budget tab. The Budget Priority tab allows the applicant to 'drag and drop' the budget line items in order of priority for funding, beginning with the most essential line item.

Grant Menu	Grant Menu	<b>BUDGET PRIORITY</b>		
	Search	Below is a list of budget line items that have been entered for this project. Sort them, by dragging and dropping, so that the most essential items are at the top of the list.		
	Face Sheet			
	Officers			
	Service Sites			
	Summary			
	Narrative			
	Budget			
	Budget Priority			
	Print			
Grant Menu	Documents			
	Activity Log			
	Special Conditions			
	Performance Measures			
	Progress Reports			
	Federal Purpose			
	Keywords			

## F. PRINT TAB INSTRUCTIONS

The Print tab allows users to generate a .pdf version of their application for review and/or submission. Application hardcopies generated while in Application Status 'Pending' have '*Pending Submission*' printed at the top of the application pages, and are unacceptable for submission.

The Application Status must read 'Awaiting Hard Copy' before generating a final .pdf. The final .pdf version is printed (and if requested, photocopied) by the applicant, signed, and sent or delivered to GOCCP before the hardcopy deadline.

## G. APPLICATION STATUS DROP DOWN INSTRUCTIONS

Home		Grant Management		Address Book		Admin		Logout			
Grant Management > Application Search											
App. Number:		Grant Number:		Req. Funds:		Match Funds:		Match %:		Project Dates:	
[Unassigned]				\$1,053.00		\$0.00		0.00 %		03/01/2013 - 03/31/2013	
										Title:	
										Financial Investigations Prac...	
										Application Status:	
										--> Submit Application	
Grant Application Menu										Pending	
Search										--> Cancel Application	
										--> Submit Application	

After completing and reviewing all sections of the application, use the 'Application Status' dropdown to submit your application electronically. Selecting 'Submit Application' from the dropdown performs a final validation check. If the validation check is successful, the application's status changes to 'Awaiting Hard Copy'.

Your Application must be placed in 'Awaiting Hard Copy' status for it to be considered for funding. After GOCCP has received your signed hardcopy(ies), the status will appear as 'Hardcopy Received'.

## H. DOCUMENTS TAB INSTRUCTIONS

If there are any additional required forms or other documents that you would like included with your application, use the Documents tab to attach those files. You may upload documents throughout the application process. This could include: DUNS/SAM verification, letters of support, etc.

## **I. SIGNATURE PAGES**

The Certified Assurances and Federal Anti-Lobbying Certification must be signed by the appropriate agency representative and included with the application hardcopies. **Both forms may only be signed by the Applicant Agency's Authorized Official or their duly assigned alternate signatory.** Both forms must be generated by the online application software.

In order for an alternate signatory to be valid, GOCCP must receive a signed, written notification from the applicant agency's Authorized Official (on agency letterhead) stating that an alternate signatory has been designated.

## **J. AUDIT FINDINGS / CORRECTIVE ACTION PLAN**

Applicants must submit copies of any Audit Findings and Corrective Action Plans with the application. **Do not send a copy of your audited financial statements;** ONLY the applicable audit findings and/or corrective action plan is required.

## **XI. CERTIFIED ASSURANCES**

### **This signed form must be generated by the Online Application Software**

#### **THE APPLICANT HEREBY ASSURES AND CERTIFIES THE FOLLOWING:**

1. That Federal funds made available under this formula grant will not be used to supplant State or local funds, but will be used to increase the amounts of such funds that would, in the absence of Federal Funds, be made available for program activities.

2. That matching funds required to pay the non-Federal portion of the cost of each project, for which grant funds are made available, shall be in addition to funds that would otherwise be made available for program activities by the recipient of the grant funds and shall be provided as required in the Grant Award document.

3. That following the first year covered by a Grant Award and each year thereafter, a performance evaluation and assessment report will be submitted to the Governor's Office of Crime Control & Prevention.

4. That fund accounting, auditing, monitoring, evaluation procedures and such records as the Governor's Office of Crime Control & Prevention shall prescribe to and shall be provided to assure fiscal control, proper management and efficient disbursement of funds received.

5. That the Grantee shall maintain such data and information and submit such reports in such form, at such times, and containing such information as the Governor's Office of Crime Control & Prevention may reasonably require to administer the program.

6. Sub-recipients will comply (and will require any sub-grantees or contractors to comply) with any applicable statutorily-imposed nondiscrimination requirements, which may include the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. § 3789d); the Victims of Crime Act (42 U.S.C. § 10604(e)); the Juvenile Justice and Delinquency Prevention Act of 2002 (42 U.S.C. § 5672(b)); the Civil Rights Act of 1964 (42 U.S.C. § 2000(d)); the Rehabilitation Act of 1973 (29 U.S.C. § 704); the Americans with Disabilities Act of 1990 (42 U.S.C. § 12131-34); the Education Amendments of 1972 (20 U.S.C. § 1681, 1683, 1685-86); the Age Discrimination Act of 1975 (42 U.S.C. § 6101-07); and the

Department of Justice (DOJ's) Equal Treatment Regulations (28 C.F.R. pt. 38).

7. That in the event a Federal or state court or administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, or disability against the Grantee, a copy of the finding will be forwarded to the Governor's Office of Crime Control & Prevention.

8. Sub-recipients that are governmental or for-profit entities, that have fifty or more employees and that receive a single award of \$500,000 or more under the Safe Streets Act or other Department of Justice (DOJ) program statutes are required to submit their Equal Employment Opportunity Plan (EEO) to the federal Office of Civil Rights (OCR). The sub-recipients are not required to submit a copy to the Governor's Office of Crime Control & Prevention (GOCCP), but must have a copy available on site for monitoring purposes. Those sub-recipients that are subject to the OCR's EEO Certification Form may access this form at: <http://www.ojp.usdoj.gov/about/ocr/eeop.htm>.

9. That the Grantee will comply with the provisions of the Governor's Office of Crime Control & Prevention's General and Special Conditions for Grants. General Conditions are posted on GOCCP's website (<http://www.goccp.maryland.gov/grants/general-conditions.php>).

10. That the Grantee will comply with the provisions of 28 CFR applicable to grants and cooperative agreement.

11. Sub-recipients are obligated to provide services to Limited English Proficient (LEP) individuals. Refer to the DOJ's Guidance Document. To access this document see U.S. Department of Justice, Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (67 Federal Regulation 41455 (2002)). This regulation may be accessed at: <http://www.archives.gov/eo/laws/title-vi.html>

**CERTIFICATION: I certify that this program will comply with the provisions set forth by the State of Maryland and the Governor's Office of Crime Control & Prevention.**

**This signed form must be generated by the Online Application Software**



## **XII. CERTIFICATION REGARDING LOBBYING**

### **This signed form must be generated by the Online Application Software**



U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
OFFICE OF THE COMPTROLLER

#### **CERTIFICATION REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying," and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-Procurement) and Government-wide Requirements for Drug-free Workplace (Grants)." The certification shall be treated as a material representation of fact upon which reliance will be placed when the Department of Education determines to award the covered transaction, grant, or cooperative agreement.

##### **1. LOBBYING**

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-grants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

##### **2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510 --

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for

commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted or otherwise criminally or civilly charged by a Government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph, (1) (b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminate for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

##### **3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67, Sections 67.615 and 67.620 --

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug-free awareness program to inform employees about --

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will –

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency, in writing, within 10 calendar days after having received notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: Director, Grants and Contracts Service, U.S. Department of Education, 400 Maryland Avenue, S.W. (Room 312A, GSA Regional Office Building No. 3), Washington DC 20202-4571. Notice shall include the identification number(s) of each affected grant.

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted --

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code)

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Check ☐ if there are workplaces on file that are not identified here.

Section 67, 630 of the regulations provides that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for Department of Justice funding. States and State agencies may elect to use OJP Form 4061/7.

Check ☐ if the State has elected to complete OJP Form 4061/7.

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DRUG-FREE WORKPLACE  
(GRANTEES WHO ARE INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67, Sections 67.615 and 67.620 --

As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and

B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk, 633 Indiana Avenue, N.W., Washington, D.C. 20531.

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As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

**This signed form must be generated by the Online Application Software**

1. Grantee Name and Address:
2. Application Number and/or Project Name
3. Grantee IRS/Vendor Number
4. Typed Name and Title of Authorized Representative
5. Signature
6. Date

**This signed form must be generated by the Online Application Software**